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Date: May 2, 2005

To: Kevin M. Burd - 2631

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Fax No.: 703-872-9306

From: Benjamin D. Driscoll - 41,571

Subject: 09/470,890- Patrick D. Smith, et al Confirmation No.:

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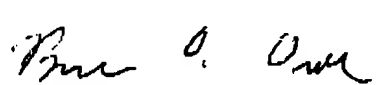
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EXAMINER:
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INVENTOR:

Kevin M. Burd
2631
09/470,890
DECEMBER 22, 1999
PATRICK D. SMITH, ET AL

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/470,890	
	Filing Date	12/22/1999	
	First Named Inventor	Patrick D. Smith	
	Group Art Unit	2631	
	Examiner Name	Kevin M. Burd	
Total Number of Pages in this Submission	Attorney Docket Number	BCS03393	

ENCLOSURES		(check all that apply)
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs _____	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below)
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